



Administrative Rules of Montana

Updated Through March 31, 2006

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WORKERS' COMPENSATION AND [24.29.1415](#) OCCUPATIONAL DISEASE

[24.29.1415](#) IMPAIRMENT RATING DISPUTE PROCEDURE (1) This section applies to dates of injury beginning July 1, 1987, through June 30, 1991. An evaluator must be a qualified physician licensed to practice in the state of Montana under Title 37, chapter 3, MCA, and board certified or board eligible in his area of specialty appropriate to the injury of the claimant, except that if the claimant's treating physician is a chiropractor, the evaluator may be a chiropractor who is certified as an impairment evaluator under Title 37, chapter 12, MCA. The claimant's treating physician may not be one of the evaluators to whom the claimant is directed by the department.

(2) The department shall arrange evaluations as close to the claimant's residence as reasonably possible.

(3) The department shall give written notice to the parties of the time and place of the examination. If the claimant fails to give 48 hours notice of his inability to attend the examination, he is liable for payment of the evaluator's charges.

(4) The department may request a party to submit all pertinent medical documents including any previous impairment evaluations to the selected evaluator.

(5) Any party wanting to provide information to an evaluator or inquire about the status of an evaluation shall do so only through the department.

(6) The impairment evaluators shall operate according to the following procedures:

(a) The evaluator shall submit a report of his findings to the department, claimant and insurer within 15 days of the date of the examination.

(b) If another evaluation is requested within 15 days after the first evaluator mailed the first report, the department shall select a second evaluator who shall render an impairment evaluation of the claimant.

(c) The second evaluator shall submit a report of his findings to the department, claimant and insurer, within 15 days of the date of the examination.

(d) The department shall submit both reports to the third evaluator, who shall then submit a final report to the department, claimant and insurer within 30 days of the date of the examination or, if no examination is conducted, within 30 days of receipt of the first and second evaluation reports from the department. The final report must certify that the other two evaluators have been consulted.

(e) If neither party disputes the rating in the final report, the insurer shall begin paying the impairment award, if any, within 45 days of the third evaluator's mailing of the report.

(f) Either party may dispute the final impairment rating by filing a petition with the workers' compensation court within 15 days of the third evaluator's mailing of the report. (History: [39-71-203](#), MCA; [IMP](#), [39-71-711](#), MCA; [NEW](#), 1987 MAR p. 1985, Eff. 10/30/87; [AMD](#), 1990 MAR p. 1004, Eff. 6/1/90; [AMD](#), 1991 MAR p. 2622, Eff. 12/27/91.)

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